

Retail Food Inspection Report

Floyd County Health Department

Telephone (812) 948-4726

Establishment Name THE EARL	Telephone Number Est (502) 590-2611 Own 502-424-5187	Date of Inspection 10/29/2021	ID#		
Address 109 E MARKET ST, NEW ALBANY IN 47150					
Owner EARL F. HAMM JR	Purpose <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow Up	Released 10/29/2021		
Owner's Address 5 NORMANDIE VILLAGE LOUISVILLE, KY 40205		Menu Type 1 _ 2 <u>X</u> 3 _ 4 _ 5 _			
Person in Charge JOURNIE HAYES					
Responsible Person's Email MARATHEEARL@GMAIL.COM					
Certified Food Handler MARA SCHMIDT					
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE COLUMN MARKED AS "R"					
Section #	C	NC	R	Narrative	To Be Corrected
187	X			Observed thermometer in a cooler, containing a liquid egg product, reading 45 degrees F. Egg product was measured at 44F. Cooler must maintain 41F or below to store egg products. PIC stated they may adjust cooler or discontinue egg storage in that cooler. Egg product discarded.	1 day
192	X			Observed expired beer cheese dated 10-15-21 in kitchen prep cooler.	Discarded
344	X			Observed napkins stored in kitchen handwashing sink. This sink must be accessible at all times. PIC stated handwashing is done at bar handwashing sink.	1 day
Summary of Violations C <u>3</u> NC <u>0</u> R <u>0</u>					
Received by (name and title printed):				Inspected by (name and title printed): Thomas Snider CFS	
Received by (signature):				Inspected by (signature): <i>Thomas Snider</i>	
cc:		cc:		cc:	